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BAGIC FEE (37 CFR 1.16(a))			:	RATE	FEE	RATE	FEE		
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	*If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL								
CLAI	MS AS AMENDE	D - PART II				· · · · · · · · · · · · · · · · · · ·			
(0	Column 1)	(Column 2)	(Column 3)	S14444		D. OTUS	ER THAN		
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FIRST PRESENTATION	OF MULTIPLE DEPENI	DENT CLAIM (37 O	FR 1.16(d))	1,	OR	X \$			
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	ima 1)	(Column 2)	(Calumn 1)	NOOT PEE	OR	ADD'L FEE			
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Independent (17 CFR.1.(60))	7 Minus	10			OR •	A-1	\Longrightarrow		
FIRST PRESENTATION OF	THINDIT RESERVATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1 18(0))								
				TOTAL	OR-	**			
If the entry in column 1 is less than the entry in column 2, write '0' in column 2									
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2". The "Highest Number Previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the highest number of the previously Paid For" (Total or Independent) is the previously paid For (Total or Independent).									
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or ration a benefit by the public which is to file (and by the user) of information is required by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this torm and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEMD FEES OR COMPLETED FORMS TO THIS